



NOTICE OF COMPLIANCE/NON-COMPLIANCE

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KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT Division of Environment Waste Management Program

Hazardous Waste: Complaint() LDF() TSF() GEN() KG() SQ() TRA() UOM() UOB() NOT A GEN()
Solid Waste: Complaint() SLF() TRF() ILF() CDL() HHW() OBS() UOS() WTT() WTP() WTM() YWC() MED()

TO: CMS Energy / Panchard Eastern Pipe Line 11 / 26 / 01
Facility Name Date

985 Road 90 Olpe KS 66865
Address City State Zip Code

KSD984972737

EPA Identification No.

Solid Waste Permit No.

This inspection was conducted to determine compliance with the state and federal solid and hazardous waste statutes and regulations.

☒ Violations As Follows

☐ No Violations Identified

Citation

- 1) KAR 28-31-4(g)(1)
- 8) KAR 28-31-4(g)(1)
- 9) KAR 28-31-4(g)(1)
- 10) KAR 28-31-4(g)(1)
- 11) KAR 28-31-4(g)(1)

Description of Violation

Contingency plan does not describe arrangements
in accordance with 40 CFR 265.52(c)
Contingency plan does not include brief
outline of the capabilities of emergency
equipment
Contingency plan does not include evacuation
routes
Inaccurate notification
Failure to maintain written job description

☐ Other Comments/Concerns:

This notice is provided to call immediate attention to those areas of non-compliance. This notice does not constitute a compliance order issued by KDHE and may not be a complete listing of all violations which may be identified as a result of this inspection. Your facility must submit in writing within 30 days of receipt of this notice a description of all corrective actions taken and/or a schedule for completion of necessary corrective actions to be taken. Any corrective actions taken by your facility will be considered in subsequent enforcement follow-up.

Your response must be submitted to:
Victoria S. O'Brien
Kansas Department of Health and Environment
Bureau of District Operation
Waste Management Programs
1500 West 7th Street
Chanute, Kansas 66720

544766

RCRA



544766

If you have any questions concerning this Notice or wish to discuss your response, you may call me at (316) 682-0785 or Bureau of Waste Management in the Topeka Office at (913) 296-1604.

This Notice was prepared by

Victoria S. O'Brien

Date 11 / 26 / 01

I, the undersigned hereby acknowledge that I have received and read this Notice.

Printed Name: Tom Jenkins

Signature: [Signature]

Title: RCRA Supervisor

Date: 11 / 26 / 01



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Solid Waste: Complaint() SLF() TRF() ILF() CDL() HHW() OBS() UOS() WTT() WTP() WTM() YWC() MED()

TO: CMS Energy / Pawnee Eastern Pipe Line 11/26/01
Facility Name Date

985 Road 90 Olpe KS 66865
Address City State Zip Code

KS D 984 972 737

EPA Identification No.

Solid Waste Permit No.

This inspection was conducted to determine compliance with the state and federal solid and hazardous waste statutes and regulations.

☒ Violations As Follows

☐ No Violations Identified

Citation

KAR 28-21-4(e)(4)
KAR 28-31-4(d)
KAR 28-31-14
KAR 28-31-4(g)(4)
KAR 28-31-4(g)(4)
KAR 28-31-4(g)(4)

Description of Violation

Failure to have manifests to ship transporter
Failure to use correct generator name
and/or address on manifest
Failure to include manifest number
on four manifests vs LDR forms
Failure to follow written inspection schedule
for emergency equipment
Failure to furnish list of hospitals in
accordance with 40 CFR 261.37(a)(4)
Failure to describe emergency actions for
fires involving hazardous waste.

☐ Other Comments/Concerns:

* Facility is actually a KS Generator but had notified as and
wanted to be (per corporate) inspected as an EPA Generator.

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Your response must be submitted to:

Victoria S. O'Brien
Kansas Department of Health and Environment
Bureau of District Operation
Waste Management Programs
1500 West 7th Street
Chanute, Kansas 66720

If you have any questions concerning this Notice or wish to discuss your response, you may call me at (316) 620-431-2390 or Bureau of Waste Management in the Topeka Office at (913) 296-1604.

785
This Notice was prepared by

Victoria S. O'Brien

Date 11/26/01

I, the undersigned hereby acknowledge that I have received and read this Notice.

Printed Name: TOM JENKINS

Signature: [Signature]

Title: Area Supervisor

Date: 11/26/01



KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
BUREAU OF WASTE MANAGEMENT
1000 SW JACKSON, SUITE 320, TOPEKA, KANSAS 66612-1366



**HAZARDOUS WASTE GENERATOR/TRANSPORTER
COMPLIANCE INSPECTION CHECKLIST**

General	<input checked="" type="checkbox"/> Routine <input type="checkbox"/> Complaint
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EPA ID KSD 984 972 737 Time 10:45 a.m. Date November 26, 2001

Facility Name CMS Energy/Panhandle Eastern Pipeline District Southeast

Street 985 Road 90 City Olpe Kansas ZIP 66865

Mailing Address (if different than above) P.O. Box 4967, Env. Services, Houston, TX 77210-4967

County Lyon Phone (620) 475-3226

Contact(s) Tom Jenkins - Area Supervisor and Victoria Wagner - Env. Coord. (713) 989-7459

Inspector(s) Victoria S. O'Brien SIC: 4922

Type of Business Natural Gas Compressor Station Number of Employees 18

Facility size classification: ☐ Closed ☐ Small Qty. Generator ☒ EPA Generator
☐ Not a Generator ☐ Kansas Generator ☐ Transporter

Other Regulated Activities: ☐ T/S/D Facility ☒ Used Oil Activities
(complete applicable checklist) ☐ HW Burner/Marketer ☐ Universal Waste Activities

Has the company declared any information/processes as trade secrets (KSA 65-3447)? No
If yes, explain:

Industrial Wastes Generated

(List hazardous wastes first)

Waste:	Petroleum Naphtha from three parts washers	Shop Rags
If waste is hazardous give HW ID Number:	D001, D018, D039, D040	Exempt
Amount generated per month:	57 to 75 Gals Per Three Months	1500 to 2000 Per Week
Amount presently in storage:	None	Unknown
Accumulation time:	Not Applicable	<One Week
Present disposal methods:	Safety-Kleen	Arrowmark

Waste:	Oil Based Paints and Thinner	Sand Blast Media
If waste is hazardous give HW ID Number:	D001, D008, F003	Nonhazardous
Amount generated per month:	900 Pounds in 2001	40 Cubic Yards Per Year
Amount presently in storage:	None	None
Accumulation time:	Not Applicable	Not Applicable
Present disposal methods:	Safety-Kleen	Hamm's Quarry

Waste:	Basement Sludge	General Trash
If waste is hazardous give HW ID Number:	Nonhazardous	Nonhazardous
Amount generated per month:	330 Gallons Per Six Months	≈5,000 Pounds Per Year
Amount presently in storage:	220 Gallons	Unknown
Accumulation time:	Not Applicable	<One Week
Present disposal methods:	Hamm's Quarry	Waste Management

Waste:		
If waste is hazardous give HW ID Number:		
Amount generated per month:		
Amount presently in storage:		
Accumulation time:		
Present disposal methods:		

Waste:		
If waste is hazardous give HW ID Number:		
Amount generated per month:		
Amount presently in storage:		
Accumulation time:		
Present disposal methods:		

General Requirements (GGR)

YES NO NA

1. Has the facility evaluated all potentially hazardous waste(s) to determine if it is hazardous? [KAR 28-31-4(b)/40 CFR 261.2] ☒ ☐
- a. If waste(s) was tested, was the analysis conducted by a laboratory certified by KDHE? [KAR 28-31-4(b)(3)(A)] ☒ ☐
- b. If waste(s) was tested, are the results kept for three years from date waste was sent on/offsite for T/S/D? [KAR 28-31-4(f)(1)(C)] ☒ ☐
2. Is hazardous waste(s) disposed of via the sanitary sewer to a Publicly Owned Treatment Works (POTW)? [KAR 28-31-3/40 CFR 261.4] ☐ ☒
- a. If yes, does the facility discharge greater than 25 kilograms per month? ☐ ☐
- b. If yes, has facility submitted the RCRA (Wastewater) Notification Form [40 CFR, Part 403.12(p)] to the following agencies:
- City - POTW? ☐ ☐
- US EPA Region VII - Director of Waste Management? ☐ ☐
- KDHE - Bureau of Waste Management? ☐ ☐
- NOTE: RCRA (Wastewater) Notification forms are obtained from: Bureau of Water (785) 296-5551.
3. Does facility dispose of industrial waste that requires a Special Waste Disposal Authorization at a permitted sanitary landfill? ☐ ☐
- a. If yes, list the authorization number(s): 01-0486, 01, 0487, and 01-0488

General Requirements:☒ Compliance ☐ Non-Compliance ☐ NA**Notification of Requirements (GGR)**

4. Has facility notified KDHE and obtained an EPA Identification Number? [KAR 28-31-4(c)] ☒ ☐
5. Is current notification accurate? [KAR 28-31-4(c)(1)] ☐ ☒ ☐

Notification Requirements:☐ Compliance ☒ Non-Compliance ☐ NA

(small quantity generator not accumulating, stop here)

Pre-Transport Requirements (GPT)

YES NO NA

6. Does generator package waste in accordance with 49 CFR 173, 178, and 179 requirements? [KAR 28-31-4(e)(1)] [X] []
7. Does generator label (flammable liquid, poison, etc.) each package in accordance with DOT requirements of Subpart E of 49 CFR 172? [KAR 28-31-4(e)(2)] [X] []
8. Does generator mark (consignee's or consignor's name and address, etc.) on each package in accordance with DOT requirements of 49 CFR 172 Subpart D? [KAR 28-31-4(e)(3)] [X] []
- a. Does generator mark each container of 110 gallons or less as below? [KAR 28-31-4(e)(3)] [X] []

Hazardous Waste-Federal Law Prohibits Improper Disposal.

If found, contact the nearest police or public safety authority or the US EPA.

*Generator's Name and Address
Manifest Document Number*

9. Does generator have placards to offer to transporters in accordance with 49 CFR 172 Subpart F? [KAR 28-31-4(e)(4)] [] [X]
10. Does generator only use a transporter who has notified the department and obtained an EPA Identification Number? [KAR 28-31-4(c)(2)] [X] []

Pre-Transport Requirements:

[] Compliance [X] Non-Compliance [] NA

Storage Requirements (GPT)

11. Does generator temporarily store waste in containers before transport? [X] []
If yes,
- a. Are containers marked with the words "Hazardous Waste"? [KAR 28-31-4(g)(3) or (h)(1)(D)] [X] []
- b. Is the accumulation start date marked on each container? [KAR 28-31-4(g)(2) or (h)(1)(C)] [X] []
- c. Are all containers holding hazardous waste in good condition and closed during storage except when necessary to add or remove waste? [KAR 28-31-4(g)(1) or (h)(1)(B)] [X] []
- d. Does generator conduct weekly inspections of containers for signs of leakage and/or deterioration caused by corrosion or other factors? [KAR 28-31-4(g)(1) or (h)(1)(B)] [X] []
- A. If yes, are these inspections documented in a log that includes complete date and time of inspection, full name of inspector, notations of observations, and date and nature of remedial actions? [KAR 28-31-4(k)/40 CFR 265.15(d)] [X] []

Storage Requirements:

[X] Compliance [] Non-Compliance [] NA

(Small quantity generator accumulating <1,000 Kilograms stop here)

Storage Requirements for Kansas and EPA Generators (GPT)

	YES	NO	NA
e. Is hazardous waste stored for 90 days or less?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f. Is $\geq 1,000$ kilograms of hazardous waste stored for more than 90 days?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
g. Are containers holding ignitable or reactive waste(s) located at least 15 meters (50 feet) from the facility's property line? (EPA Generator and T/S/D Only) [KAR 28-31-4(g)(1)/40 CFR 265.176]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. If waste in containers is incompatible with other materials stored nearby, are the containers separated from the other materials by means of a dike, berm, wall, or other means? [KAR 28-31-4(g)(1) or (h)(1)(B)/40 CFR 265.177]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Does generator have any satellite storage areas? [KAR 28-31-4(j)]	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
A. Is the waste stored in a container at or near the point of generation and under the control of the operator of the process generating the waste?	<input type="checkbox"/>	<input type="checkbox"/>	
B. Is the container in good condition and closed except to add or remove waste?	<input type="checkbox"/>	<input type="checkbox"/>	
C. Is the container marked with the words "Hazardous Waste"?	<input type="checkbox"/>	<input type="checkbox"/>	
D. Is the container marked with the accumulation start date at the time it becomes full?	<input type="checkbox"/>	<input type="checkbox"/>	
E. Is the full container moved to the storage area within three days after it becomes full?	<input type="checkbox"/>	<input type="checkbox"/>	

(If waste(s) is placed in tanks, piles, or surface impoundments, complete the appropriate inspection checklist.)

Storage Requirements: ☒ Compliance ☐ Non-Compliance ☐ NA

Manifests (GMR)

12. Is a contractual agreement used in place of manifesting? [KAR 28-31-4(d)(7)(A-C)/40 CFR 262.20(e)(1-2)]	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
If yes,			
a. Does the contractual agreement include the type of waste and frequency of shipments?	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is the vehicle used to transport the waste owned and operated by the reclaimer of the waste?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Is a copy of the agreement kept for a period of three years after termination of agreement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Is a current manifest showing revision date and burden disclosure statement used? [KAR 28-31-4(d)/40 CFR 262.20]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
a. If yes, does manifest(s) include:			
A. Generator EPA Identification Number (12 digit) and unique manifest document number (five digit)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
B. Number of pages?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
C. Generator's name and mailing address?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
D. Generator's phone number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
E. Transporter 1 Name?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
F. Transporter 1 EPA Identification Number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
G. Transporter 2 Name?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Transporter 2 EPA Identification Number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Name and site address of designated facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
J. Designated facility's EPA Identification Number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

- K. Waste Description (DOT shipping name, hazard class, and Identification Number)? ☒ ☐ ☐
- i. If applicable, are the requirements of 49 CFR 172.203(k) met? ☒ ☐ ☐
- L. Number and type of containers? ☒ ☐ ☐
- M. Total quantity? ☒ ☐ ☐
- N. Unit (weight or volume)? ☒ ☐ ☐
- O. Special handling instructions? ☒ ☐ ☐
- P. Generator's certification including waste minimization statement, generator's signature and date? ☒ ☐ ☐
- Q. Name, signature, and date of transporter 1? ☒ ☐ ☐
- R. Name, signature, and date of transporter 2? ☒ ☐ ☐
- b. Does generator retain a copy of manifest(s) signed by both generator and transporter? [KAR 28-31-4(d)(4)(A-C)/40 CFR 262.23] ☒ ☐ ☐
- c. Does generator retain copy of manifest(s) signed and dated by T/S/D facility owner/operator for three years? [KAR 28-31-4(f)(1)(A)] ☒ ☐ ☐
- d. Has generator ever failed to receive a signed copy of a manifest within 45 days of initiating a shipment? ☐ ☒ ☐
- A. If yes, was exception report(s) filed? [KAR 28-31-4(f)(4)(B)] ☐ ☐ ☐
- i. If yes, was copy retained for three years? [KAR 28-31-4(f)(1)(A)] ☐ ☐ ☐

Manifesting Requirements: ☐ Compliance ☒ Non-Compliance ☐ NA

Land Disposal Restriction Requirements (GLB)

14. Does facility generate waste(s) subject to the Land Disposal Restrictions? [KAR 28-31-14/40 CFR 268] ☒ ☐ ☐
15. Does the generator dispose of his waste under a contractual or tolling agreement? [40 CFR 268.7(a)(10)] ☐ ☒ ☐
- a. If yes, is a Land Disposal Restriction Notice available for the initial shipment? ☐ ☐ ☐
- b. If yes, is a copy of this notice kept for three years after termination of the agreement? ☐ ☐ ☐
16. Is the waste(s) covered by a National Variance(s), Extension, or Petition? [40 CFR 268.5 & 6] ☐ ☒ ☐
- a. If yes, describe the variance, extension, or petition which applies:
-
17. Does generator ship waste(s) covered by the Land Disposal Restrictions off-site for treatment or disposal? [40 CFR 268.7(a)(1)] ☒ ☐ ☐
- If yes,
- a. Did the generator provide a notice with the initial shipment? ☒ ☐ ☐
- b. Did the notice include: EPA hazardous waste number(s), manifest number(s), waste analysis data, if available, and waste constituents, wastewater or nonwastewater classification, and subcategory, if applicable? ☐ ☒ ☐
18. Has the generator determined that his waste meets applicable treatment standards or does not exceed prohibition levels and requires no further treatment? [40 CFR 268.7(a)(2)] ☐ ☒ ☐

- a. If yes, does the generator provide a notice and certification statement with each shipment, stating the waste meets applicable treatment standards or prohibition levels? ☐ ☐
19. Is the waste covered by an exemption? [40 CFR 268.7(a)(3)] ☐ ☒
- a. If yes, does the generator provide a notice with the waste to the T/S/D facility stating that the waste is exempt from the land disposal restrictions? ☐ ☐
20. Does the generator accumulate and treat waste in tanks, containers, or containment buildings to meet applicable treatment standards? [40 CFR 268.7(a)(4)] ☐ ☒
- If yes,
- a. Does the generator have verification that a notice was submitted to KDHE at least 30 days prior to treatment activity? ☐ ☐
- b. Does the generator have, on-site, a written waste analysis plan describing procedures used to comply with the treatment standards? ☐ ☐
- c. Does the generator ship waste off-site? ☐ ☐
- A. If yes, does the generator provide a notice and certification statement with each shipment? ☐ ☐
21. Has the generator determined his waste to be restricted based solely on his knowledge of the waste? [40 CFR 268.7(a)(5)] ☐ ☒
- a. If yes, does the generator maintain all supporting data in his on-site files? ☐ ☐
22. Has the generator determined his waste to be restricted based on testing [40 CFR 268.7(a)(5)] ☒ ☐
- a. If yes, does the generator maintain a copy of these waste analysis in his on-site files? ☒ ☐
23. Is the waste excluded from the definition of hazardous or solid waste, or is exempt from Subtitle C regulations? (40 CFR 268.7(a)(6)) ☐ ☒
- a. If yes, does the generator retain, in their file, a one-time notice of the generation and subsequent exclusion from the definition of hazardous or solid waste, and information regarding the disposition of the waste? ☐ ☐
24. Does the generator retain copies of all notices, certifications, demonstrations waste analysis data, and other documents for at least 3 years? [40 CFR 268.7(a)(7)] ☒ ☐ ☐
25. Does the generator claim that the hazardous debris is excluded from the definition of hazardous waste under 40 CFR 261.3(f)(1) or (2)? [40 CFR 268.7(d)] ☐ ☒
- a. If yes, does the generator provide a one-time notice and certification to the State of Kansas and retain a copy in his files? ☐ ☐
26. Is the generator managing a lab pack waste(s)? [40 CFR 268.7(a)(8)] ☐ ☒
- If yes,
- a. Does the generator wish to use an alternative treatment standard? ☐ ☐
- b. Does the generator provide a notice and certification with each shipment? ☐ ☐
27. Does generator claim that their characteristic waste is no longer hazardous? [40 CFR 268.9(d)] ☐ ☒
- If yes,

YES NO NA

- a. Has the generator submitted a one-time notice and certification to the State of Kansas and retained a copy for their files? ☐ ☐
- b. Does the information on the notice and certification need to be updated? ☐ ☐

LDR Requirements: ☐ Compliance ☒ Non-Compliance ☐ NA

Special Conditions (GSC)

28. Has generator received or transported any hazardous waste to or from a foreign source? (40 CFR Subpart E & F) ☐ ☒
- If yes,
- a. Has generator filed a notice with the Secretary of the KDHE? ☐ ☐
- b. Is waste manifested and signed by a foreign consignee? ☐ ☐
- c. If generator transports waste out of the country, has confirmation of delivered shipment been received? ☐ ☐ ☐

Special Conditions Requirements: ☐ Compliance ☐ Non-Compliance ☒ NA

(If Kansas generator, stop here)

Biennial Reports (GRR)

YES NO NA

32. Has EPA generator submitted a biennial report(s) to KDHE? [KAR 28-31-4(f)(2)] **See Comments**
- a. If yes, does the biennial report include a written description of the generator's waste minimization program?
[KAR 28-31-4(f)/40 CFR 262.41(a)] ☐ ☐ ☐
- A. If yes, does the description include:
- i. Efforts undertaken during the year to reduce the volume and toxicity of waste generated?
[KAR 28-31-4(f)/40 CFR 262.41(a)(6)] ☐ ☐
- ii. Changes in volume and toxicity of waste actually achieved during the year in comparison to previous years?
[KAR 28-31-4(f)/40 CFR 262.41(a)(7)] ☐ ☐
- iii. Certification by the generator or authorized representative?
[KAR 28-31-4(f)/40 CFR 262.41(a)(8)] ☐ ☐
- b. If no, can the facility personnel provide a verbal description of the waste minimization program? ☐ ☐ ☐
- Description of Program:
- _____
- c. Is there any visual evidence of the facility's waste minimization efforts?
If yes, describe the activities/program observed. ☐ ☐
- _____
- d. Does generator retain a copy of the report for three years?
[KAR 28-31-4(f)(1)(B)] ☐ ☐

(Note: compare quantities reported on last biennial report with the total quantity of all manifests for those years.)

Biennial Report Requirements:☐ Compliance☐ Non-Compliance☒ NA**Preparedness and Prevention (GPT)**

33. If appropriate, based upon the nature and quantity of waste(s) generated and stored at the facility, is the facility equipped with:
- a. Internal communication or alarm system easily accessible in case of emergency? [KAR 28-31-4(g)(4)/40 CFR 265.32(a)] ☒ ☐
- b. Telephone or hand-held two-way radio capable of summoning emergency assistance from local police departments, fire departments, or State or local emergency response teams? [KAR 28-31-4(g)(4)/40 CFR 265.32(b)] ☒ ☐ ☐
- c. Portable fire extinguisher, fire control equipment, spill control equipment, and decontamination equipment? [KAR 28-31-4(g)(4)/40 CFR 265.32(c)] ☒ ☐
- d. Is water of adequate volume provided for hose streams, foam producing equipment, sprinklers, etc.? [KAR 28-31-4(g)(4)/40 CFR 265.32(d)] ☒ ☐
- e. Is this equipment (a-c above) tested and maintained to ensure its proper operation? [KAR 28-31-4(g)(4)/40 CFR 265.33] ☐ ☒
34. Does a check of the facility show sufficient aisle space to allow unobstructed movement of personnel and equipment? [KAR 28-31-4(g)(4)/40 CFR 265.35] ☐ ☐ ☒
35. If appropriate for the type(s) of waste handled, has the owner/operator made the following arrangements:

- a. Familiarized the local emergency authorities with the facility, waste(s) handled, entrances and exits? [KAR 28-31-4(g)(4)/40 CFR 265.37(a)(1)] ☒ ☐
- b. Designated one authority where one or more police or fire departments might respond to an emergency? [KAR 28-31-4(g)(4)/40 CFR 265.37(a)(2)] ☒ ☐ ☐
- c. Made agreements with local emergency response teams, emergency response contractors, and equipment suppliers? [KAR 28-31-4(g)(4)/40 CFR 265.37(a)(3)] ☐ ☐ ☒
- d. Familiarized local hospitals with the properties of hazardous waste(s) handled and types of injuries which could result from fires, explosions, or releases at the facility. [KAR 28-31-4(g)(4)/40 CFR 265.37(a)(4)] ☐ ☒
36. In cases where local authorities decline to enter into such arrangements, is the refusal entered in the operating record? [KAR 28-31-4(g)(4)/40 CFR 265.37(b)] ☐ ☐ ☒

Preparedness and Prevention**Requirements:**☐ Compliance ☒ Non-Compliance ☐ NA**Personnel Training (GPT)**

37. Has the owner/operator established a hazardous waste management training program? [KAR 28-31-4(g)(4)/40 CFR 265.16] ☒ ☐
- a. Is the program directed by a person trained in hazardous waste management? [40 CFR 265.16(a)(2)] ☒ ☐
- b. Are new personnel trained within six months after their employment? [40 CFR 265.16(b)] ☒ ☐
- c. Are new employees supervised until training is completed? [40 CFR 265.16(b)] ☒ ☐
- d. After initial training, are employees trained on an annual basis? [40 CFR 265.16(c)] ☒ ☐
- e. Does the facility maintain the following documents and records:
- A. Job title for each position related to hazardous waste management and the name of the employee filling each job? [40 CFR 265.16(d)(1)] ☒ ☐
- B. Written job description for each position? [40 CFR 265.16(d)(2)] ☐ ☒
- C. Description of type and amount of training to be given each person? [40 CFR 265.16(d)(3)] ☒ ☐
- D. Records of training given to facility personnel? [40 CFR 265.16(d)(4)] ☒ ☐

Personnel Training Requirements:☐ Compliance ☒ Non-Compliance ☐ NA**Contingency Plan (GPT)**

38. Does the facility have a contingency plan? [KAR 28-31-4(g)(4)/40 CFR 265 Subpart D] ☒ ☐
- If yes,
- a. Does the plan list the name(s), home address, and phone number of designated emergency coordinator(s) in the order in which they should be contacted? [40 CFR 265.52(d)] ☒ ☐
- b. Is an emergency coordinator available at all times? [40 CFR 265.55] ☒ ☐
- c. Does the plan describe emergency actions facility personnel must take to respond to fires, explosions, or releases of hazardous waste? [40 CFR 265.52(a)] ☐ ☒

- | | | | | |
|----|--|-------------------------------------|-------------------------------------|--------------------------|
| d. | Does the plan describe arrangements made with emergency response agencies? [40 CFR 265.52(c)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| e. | Does the plan include a list of all emergency equipment at the facility, its location, a physical description of each item on the list, and a brief outline of the capabilities of each item? [40 CFR 265.52(e)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| f. | Does the plan include an evacuation plan for facility personnel that describes signals and evacuation routes? [40 CFR 265.52(f)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| g. | Have copies of the plan been provided to outside emergency response agencies and hospitals? [40 CFR 265.53] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| h. | Has implementation of the plan been required at the facility? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| A. | If yes, was the facility required to submit a written report on the incident to the KDHE? | <input type="checkbox"/> | <input type="checkbox"/> | |
| i. | If yes, was the written report submitted? [40 CFR 265.56(j)] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Contingency Plan Requirements:	<input type="checkbox"/> Compliance	<input checked="" type="checkbox"/> Non-Compliance	<input type="checkbox"/> NA
--------------------------------	-------------------------------------	--	-----------------------------

(if EPA generator, stop here.)

GENLIST: Generator Checklist Revised 9/98

Additional Information and Conclusions:

On November 26, 2001, I conducted a routine hazardous waste compliance inspection of CMS Energy/Panhandle Eastern Pipe Line located at 985 Road 90, Olpe, Kansas in Lyon County. The facility, a natural gas compressor station, employs 18 individuals. The EPA identification number assigned to the site is KSD 984 972 737. Facility contacts for the inspection were Tom Jenkins - Area Supervisor and, via telephone, Victoria Wagner - Environmental Coordinator. Ms. Wagner is based in Houston, Texas. At the time of my inspection, the facility was regulated as a Kansas Generator based on generation and storage rates; however, the facility had notified as an EPA generator and Ms. Wagner requested that the facility be inspected as an EPA Generator. After discussing the situation with the Topeka office, the facility was inspected as an EPA Generator.

The facility generates 57 to 75 gallons of waste petroleum naphtha, classified as D001, D018, D039, D040 hazardous waste, every three months from the use of three parts washers serviced by Safety-Kleen. In 2001, the facility had a one-time generation of approximately 900 pounds of oil based paints and thinners, classified as D001, D008, F003 hazardous waste, from cleaning out a shed. The facility generates 1500 to 2000 shop rags each week that are picked up and laundered by Arrowmark.

Nonhazardous waste generated at the site include sand blasting media and basement sludge (dirt, paper, leaves, etc.) that are disposed of under special waste disposal authorizations at Hamm's Quarry. The facility's general trash is picked up weekly by Waste Management.

Used oil and used oil filters generated at the site are discussed in a separate report.

After completing the walk-through of the facility, discussing the facility's operations with Mr. Jenkins, and reviewing the facility's paperwork pertaining to nonhazardous and hazardous

waste management, I cite the facility for the following violations. Seven of the violations cited pertained to EPA Generators and were not actually applicable to the facility since it is regulated as a Kansas Generator. The seven violations applicable to EPA Generators are italicized below.

Violation 1 - K.A.R. 28-31-4(e)(4) - Failure to have placards - During the inspection, facility personnel could not produce any placards that the facility had available to offer to transporters of the company's hazardous waste.

Violation 2 - K.A.R. 28-31-4(d) - Failure to use correct generator name and/or address on nine manifests - During the inspection, facility personnel told me that the official name of the facility was CMS Energy/Panhandle Eastern Pipe Line. Over the last three years, the generator name reflected on hazardous waste manifests used to ship the facility's hazardous waste off-site has included: 1) PEPL, OLPE, KS Station, 2) Panhandle Eastern Pipeline, 3) PEPL, OLPE, KS, and 4) Panhandle Eastern.

In addition, the facility has used two separate generator addresses on the manifests: 1) 3 MI N 1 ½ MI W of OLP RR1 Box 174 A and 2) P.O. Box 4967, WT439, Houston, TX.

Documentation of this violation is set forth in Attachment 1 to this report.

Violation 3 - K.A.R. 28-31-14 - Failure to include manifest number on LDR forms - Facility personnel failed to include the manifest document number on the land disposal restriction forms for manifests 04292 and 40587. Documentation of this violation is set forth in Attachment 2 to this report.

Violation 4 - K.A.R. 28-31-4(g)(4) - Failure to follow written inspection schedule for emergency equipment - *The facility's monthly fire extinguisher inspection for the months of January 2001 and February 2001 were both conducted on February 5, 2001. Documentation of this violation is set forth in Attachment 3 to this report.*

Violation 5 - K.A.R. 28-31-4(g)(4) - Failure to familiarize local hospital in accordance with 40 CFR 265.37(a)(4) - *When I asked facility personnel for documentation that the facility had familiarized the local hospital of the properties of hazardous waste handled at the facility and the types of injuries or illnesses that would result from fires, explosions, or releases involving hazardous waste at the facility, I was given a copy of the facility's emergency response plan, see Attachment 4, and told that no other information had been provided to the hospital. The information set forth on the plan does not include all of the information required by 40 CFR 265.37(a)(4).*

Violation 6 - K.A.R. 28-31-4(g)(4) - Failure to describe emergency actions for fires involving hazardous waste - *The facility's emergency response plan set forth in Attachment 4 does not include any information pertaining to response*

actions that would be taken in the event the facility experienced a fire involving hazardous waste.

Violation 7 - K.A.R. 28-31-4(g)(4) - Contingency plan does not describe arrangements in accordance with 40 CFR 265.52(c) - See Attachment 4 for documentation of this violation.

Violation 8 - K.A.R. 28-31-4(g)(4) - Contingency plan does not include brief outline of the capabilities of emergency equipment - See Attachment 4 for documentation of this violation.

Violation 9 - K.A.R. 28-31-4(g)(4) - Contingency plan does not include evacuation routes - The primary and secondary evacuation routes reflected in the facility's emergency response plan, see Attachment 4, only includes the office building and the auxiliary building. It does not included all of the areas in which the facility's parts washers are used or the designated hazardous waste storage area.

Violation 10 - K.A.R. 28-31-4(c)(1) - Inaccurate notification - During the inspection, facility personnel told me that the official name of the company was CMS Energy/Panhandle Eastern Pipe Line. Therefore, I cited the facility for not submitting a revised notification. Ms. Wagner later informed me, via letter, that the official name of the company is PEPL - OLPE.

Violation 11 - K.A.R. 28-31-4(g)(4) - Failure to maintain written job descriptions - A copy of the facility's job description for the Area Supervisor, Mr. Jenkins, is set forth in Attachment 5 to this report. The job description does not include information pertaining to Mr. Jenkins hazardous waste management job duties.

ATTACHMENT 1

Please print or type. (Form designed for use on electric typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. KSD984972737		Manifest Document No. 61600 #00375		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address PANHANDLE EASTERN 3 MI N. 1 1/2 MI W. OF OLP RR1 BOX 174 A OLPE KS 66865						A. State Manifest Document Number			
4. Generator's Phone (316 475-3226)						B. State Generator's ID			
5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC				6. US EPA ID Number 11 D984908202		C. State Transporter's ID			
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 316 942-5001			
9. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC 1311 S ANNA WICHITA, KS 67209						E. State Transporter's ID			
10. US EPA ID Number KSD000809723						F. Transporter's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers No.		13. Total Quantity	
a. RM WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D027, D039D040) (ERG#128)						3		64	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above I(A) D018 D006 (A) D008, D027, D040						K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information IF UNDELIVERABLE, RETURN TO GENERATOR. FOR RECYCLE EMERGENCY RESPONSE#800-468-1760 24HR. 0004 98334303 0001461600 0002033068 02									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Vicki L. Jacobs						Signature Vicki L. Jacobs		Date 11/25/00	
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature Gilbert Baer		Date 11/25/00	
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature		Date	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.									
Printed/Typed Name Coralee White						Signature Coralee White		Date 11/26/00	

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

K54474-R5732
LOCATION: 619501

SAFETY-KLEEN
LDR NOTIFICATION FORM

01/03/00 PAGE: 1
01:58:20

GENERATOR NAME: PANHANDLE EASTERN

MANIFEST NO.:
OR SALES SERVICE NO.: 1461600

CUST#: 0002-0330-68

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0010083

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):

D001
D006
D008
D018
D027
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION: NONE
=====

-----NOTES-----

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2000.

X Vick L. Jacobs
GENERATOR'S AUTHORIZED
SIGNATURE

NAME & TITLE
(PRINTED OR TYPED)

1/25/00
DATE

SEQ#: 5721 LOC: 619501

TERR: 02 REF#: 1461600 SW: 0004

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1
of 1Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID (316) 269-7400

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

PEPL, OLPE, KS STATION
P.O. BOX 4967, HT439, HOUSTON, TX 77210

4. Generator's Phone (713) 989-7352

5. Transporter 1 Company Name

6. US EPA ID Number

7. Transporter 2 Company Name SAFETY-KLEEN (KS) INC.

8. US EPA ID Number SCRO00074591

9. Designated Facility Name and Site Address

10. US EPA ID Number

SAFETY-KLEEN (WICHITA) INC.
2549 N. NEW YORK ST.
WICHITA, KS 67219

KSD007246846 (316) 269-7400

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers
No. Type13. Total
Quantity14. Unit
Wt/Vol

1. Waste No.

HM

a. WASTE PAINT, 3, UN1263, II

005 DM 00900 P

D 001

D 008

b. NON REGULATED MATERIAL, NONE

001 DM 00350 P

N / R

RECEIVED
JUL 27 2001

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

Additional a. P003

EPA Waste b.

Codes c.

d.

a. 4x55gal, 1x35gal
b. 1x55gal

ERG: a.

c.

d.

a.

b. M131

c.

d.

15. Special Handling Instructions and Additional Information

PANHANDLE EASTERN PIPELINE CO
985 ROAD 90
OLPE, KS 66865Profile a. 2226592-16
Numbers b. 2208745-45c.
d.

W04: 50754

Emergency

Contact: 800-468-1760

3E Company Fax 316-269-7455

245D-4 60633 5 60637 7-62907

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Date
Month Day Year

Dustin Redeker

Dustin Redeker

07/17/01

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date

Nate Embury

Nate Embury

07/17/01

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date

19. Discrepancy Indication Space

JUL 24 2001

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Signature

Date
Month Day Year

Nellamy McErtle

Nellamy McErtle

07/23/01

SAFETY-KLEEN CORP.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

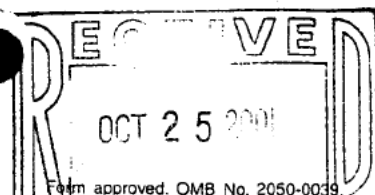
DWALKER.LDR.NOTIFICATION (8/00)

GENERATOR

TEXAS NATURAL RESOURCE
CONSERVATION COMMISSION

P.O. Box 13067

Austin, Texas 78711-3087



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. KSD984972737		Manifest Document No. 003210		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Olpe Panhandle Eastern Pipeline P.O. Box 4967 Attn: Environmental Service		4. Generator's Phone (620) 475-3226 Houston, TX 77210-4967		A. State Manifest Document Number 02505902		B. State Generator's ID 99920			
5. Transporter 1 Company Name Greensburg Oilfield Service		6. US EPA ID Number KSR000005074		C. State Transporter's ID 84763		D. Transporter's Phone 620-723-2112			
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone			
9. Designated Facility Name and Site Address Kim Thomas Disposal Perryton, Texas		10. US EPA ID Number		G. State Facility's ID WDW 311		H. Facility's Phone 806-435-2624			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.			
	a. Nonregulated Waste Water			EST 5000	G	OUTS 1131			
	b.								
	c.								
	d.								
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above					
15. Special Handling Instructions and Additional Information Panhandle Eastern Pipeline Co. P.O. Box 1642, Room WT 726 Houston, Texas 77251-1642				Mail Completed Manifest to Houston Address Emergency # 1-800-535-5053					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name JB Richardson PEPL				Signature JB Richardson		Month Day Year 10/08/01			
17. Transporter 1 Acknowledgement of Receipt of Materials				Date					
Printed/Typed Name Dennis R Powell				Signature Dennis R Powell		Month Day Year 10/8/01			
18. Transporter 2 Acknowledgement of Receipt of Materials				Date					
Printed/Typed Name				Signature		Month Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name Kim Thomas Disposal				Signature Joe Bullard		Month Day Year 10/11/01			

6-195-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

Manifest Document No.

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

KSD984972737

2. Page 1
of 1Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

PEPL, OLPE KS
PO BOX 4967, WT439
HOUSTONATTN: JANET HARPER
TX 77210

4. Generator's Phone (316) 475-3226

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name

SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number

SCR000075150

C. State Transporter's ID

D. Transporter's Phone 316 942-5001

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

SAFETY-KLEEN SYSTEMS, INC
1311 S ANNA
WICHITA, KS 67209

10. US EPA ID Number

KSD000809723

G. State Facility's ID

H. Facility's Phone

316 942-5001

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers
No. Type13. Total
Quantity14. Unit
Wt/Vol

15. Waste No.

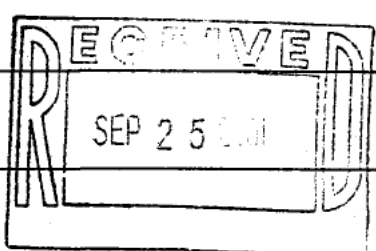
a. X WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PG111 RG
(D001)ERG#128 (6.7#/GL) (D018, D039, D040)

6

DM

57

G

D001
D039b. c. d.  199/H/L2
BH/10/5/01

J. Additional Descriptions for Materials Listed Above

I(A) D018 D040

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

IF UNDELIVERABLE, RETURN TO GENERATOR FOR RECYCLE
EMERGENCY RESPONSE#800-468-1760 24HR.

0137 101121038 0018688018 0002033068 04

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Vicki Jacobs

Signature

Vicki Jacobs

Date

Month Day Year
9/20/01

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Anthony Cesar

Signature

Anthony Cesar

Date

Month Day Year
9/20/01

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date

Month Day Year

19. Discrepancy Indication Space

CORRECTION LINE: 1 A. SHOULD READ 00324

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

James Anderson

Signature

James Anderson

Date

Month Day Year
9/20/01

SAFETY-KLEEN CORP.

14474-R5732
LOCATION: 619501

SAFETY-KLEEN
OR NOTIFICATION FORM

08/18/01 PAGE: 1
09:53:34

GENERATOR NAME: PEPL, OLPE KS

MANIFEST NO.: ~~82017~~ 00524
OR SALES SERVICE NO.: 18688018

CUST#: 0002-0330-68

IN ACCORDANCE TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000801

WASTE CODES & LDR SUBCATEGORIES (IF ANY):
0001 LQ LIQUID >= 10% TOC

0018
0039
0040

BIODEGRADABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

00 D-CRESOL
29 TETRACHLOROETHYLENE
37 TRICHLOROETHYLENE
47 ARSENIC
50 CADMIUM
55 LEAD
57 MERCURY - ALL OTHERS
60 SILVER
7 BENZENE

NOTES
PLEASE NOTICE: THIS LDR EXPIRES ON 12/31/2001.

Vicki Jacobs
GENERATOR'S AUTHORIZED
SIGNATURE

Vicki Jacobs
NAME & TITLE
(PRINTED OR TYPED)

9/20/01
DATE

Q#: 319 LOC: 619501

TERR: 04 REF#: 18688018 SW: 0137

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

Please print, or type: (Form designed for use on elite (12 pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. KSD984972737		Manifest Document No. 48944		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address PANHANDLE EASTERN 3 MI N. 1 1/2 MI W. OF OLP RR1 BOX 174 A OLPE KS 66865						A. State Manifest Document Number 73748944			
4. Generator's Phone (316) 475-3226						B. State Generator's ID			
5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC				6. US EPA ID Number SCR000075150		C. State Transporter's ID			
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 316 942-5001			
9. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC 1311 S ANNA WICHITA, KS 67209						E. State Transporter's ID			
10. US EPA ID Number KSD000809723						F. Transporter's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers No.		13. Total Quantity	
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII RG (D001)ERG#128 (6.7#/GL)(D018, D039, D040)						3		65	
b. WDR: 1024001									
c.									
d.									
J. Additional Descriptions for Materials Listed Above I(A) D018 D040						K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information IF UNDELIVERABLE, RETURN TO GENERATOR. FOR RECYCLE EMERGENCY RESPONSE#800-468-1760 24HR. 0040 099577617 0004248944 0002033068 02									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name DAN J. GABLE				Signature <i>[Signature]</i>		Date 10/4/00			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name DARRIN R. HARVEY				Signature <i>[Signature]</i>		Date 10/4/00			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		Date			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name Scott Vincent									
Signature <i>[Signature]</i>				Date 10/4/00					

54174-R5732
LOCATION: 619501

SAFETY-KLEEN
LDR NOTIFICATION FORM

08/28/00 PAGE: 1
23:33:51

GENERATOR NAME: PANHANDLE EASTERN

MANIFEST NO.: 48944
OR SALES SERVICE NO.: 4248944

CUST#: 0002-0330-68

URSUAUNT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
ASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

DR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000801

PA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D039
D040

REATABILITY GROUP: NONWASTEWATERS

ASTE CONSITITUENT NOTIFICATION:

102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
118 P-DICHLOROBENZENE
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
250 CADMIUM
251 CHROMIUM (TOTAL)
255 LEAD
57 BENZENE

NOTES

P NOTICE: THIS LDR EXPIRES ON 12/31/2000.

GENERATOR'S AUTHORIZED
SIGNATURE

DAN J. GIBB
NAME & TITLE
(PRINTED OR TYPED)

10, 4, 00
DATE

Q#: 5507 LOC: 619501

TERR: 02 REF#: 4248944 SW: 0040

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. KSD984972737		Manifest Document No. 180599		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.																																																																									
		3. Generator's Name and Mailing Address PANHANDLE EASTERN 3 MI N. 1 1/2 MI W. OF OLP RR1 BOX 174 A OLPE KS 66865		# 391		A. State Manifest Document Number 73780599		B. State Generator's ID																																																																									
4. Generator's Phone (316) 475-3226		5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC		6. US EPA ID Number ILD984908202		C. State Transporter's ID		D. Transporter's Phone 316 942-5001																																																																									
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone		G. State Facility's ID																																																																									
9. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC 1311 S ANNA WICHITA, KS 67209		10. US EPA ID Number KSD000809723		H. Facility's Phone 316 942-5001																																																																													
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity		14. Unit Wt/Vol																																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:5%;">a.</th> <th style="width:5%;">b.</th> <th style="width:5%;">c.</th> <th style="width:5%;">d.</th> <th style="width:5%;">e.</th> <th style="width:5%;">f.</th> <th style="width:5%;">g.</th> <th style="width:5%;">h.</th> <th style="width:5%;">i.</th> <th style="width:5%;">j.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="10" style="text-align: center;"> WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII RQ (D018)ERG#128 (6.7#/GL) (D001, D039, D040) </td> </tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>				a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	X										WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII RQ (D018)ERG#128 (6.7#/GL) (D001, D039, D040)																																																		No.		Type		Quantity		Unit Wt/Vol	
a.	b.	c.	d.	e.	f.	g.	h.	i.	j.																																																																								
X																																																																																	
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII RQ (D018)ERG#128 (6.7#/GL) (D001, D039, D040)																																																																																	
				3		DM		74		G																																																																							
										D001 D039																																																																							

 K. Handling Codes for Wastes Listed Above | | **RECEIVED** **APR 24 2000** | || 15. Special Handling Instructions and Additional Information **IF UNDELIVERABLE, RETURN TO GENERATOR. FOR RECYCLE EMERGENCY RESPONSE#800-468-1760 24HR. 0016 98753728 0002380599 0002033068 02** | | | | | | | | | |
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name **STEVE GRANDON**				Signature *Steve Grandon*				Date Month Day Year **4	18	00**	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature *Scott Vincent*				Date Month Day Year **4	18	00**	
Printed/Typed Name **SCOTT VINCENT**				Signature				Date			
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature				Date			
Printed/Typed Name				Signature				Date			
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.											
Printed/Typed Name **Coralee White.**				Signature *Coralee White*				Date Month Day Year **4	19	00**	

54474-R5732
LOCATION: 619501

SAFETY-KLEEN
LDR NOTIFICATION FORM

03/27/00 PAGE: 1
04:44:17

GENERATOR NAME: PANHANDLE EASTERN

MANIFEST NO.:
OR SALES SERVICE NO.: 2280599

CUST#: 0002-0330-68

IN ACCORDANCE TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

OR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000801

HA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
0001 LG LIQUID >= 10% TOC
0018
0039
0040

REATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
118 P-DICHLOROBENZENE
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
250 CADMIUM
251 CHROMIUM (TOTAL)
255 LEAD
257 BENZENE

NOTES

PLEASE NOTICE: THIS LDR EXPIRES ON 12/31/2000.

Steve Grandon
GENERATOR'S AUTHORIZED
SIGNATURE

STEVE GRANDON
NAME & TITLE
(PRINTED OR TYPED)

4 / 18 / 00
DATE

Q#: 5171 LOC: 619501

TERR: 02 REF#: 2380599 SW: 0016

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

Please print or type. (Form designed for use on elite, dot-matrix pitch typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. KSD984972737		Manifest Document No. 141470.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address PANHANDLE EASTERN 3 MI N. 1 1/2 MI W. OF OLP RR1 BOX 174 A OLPE KS 66865						A. State Manifest Document Number							
4. Generator's Phone (316) 475-3226						B. State Generator's ID							
5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC				6. US EPA ID Number SCR000075150		C. State Transporter's ID							
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 316 942-5001							
9. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC 1311 S ANNA WICHITA, KS 67209				10. US EPA ID Number KSD000809723		E. State Transporter's ID							
						F. Transporter's Phone							
						G. State Facility's ID							
						H. Facility's Phone 316 942-5001							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit		15. Waste No.	
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII RG (D001)ERG#128 (6.7#/GL) (D018, D039, D040)						3 DM		75		G		D001 D039	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above I (A) D018 D040						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information IF UNDELIVERABLE, RETURN TO GENERATOR FOR RECYCLE EMERGENCY RESPONSE#800-468-1760 24HR. 0052 099970595 0005141470 0002033068 02													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name Terry Barrett						Signature <i>Terry Barrett</i>						Date Month Day Year 12 27 00	
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>DAVID R HARDING</i>						Date Month Day Year 12 27 00	
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature						Date Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name Scott Vincent						Signature <i>Scott Vincent</i>						Date Month Day Year 11 27 00	

34474-R5732
LOCATION: 619501

SAFETY-KLEEN
WASTE NOTIFICATION FORM

12/02/00 PAGE: 1
07:50:02
41470 #00449

GENERATOR NAME: PANHANDLE EASTERN

MANIFEST NO.:
OR SALES SERVICE NO.: 5141470

CUST#: 0002-0330-68

IN ACCORDANCE TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

OR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000801

WASTE CODES & LDR SUBCATEGORIES (IF ANY):
0001 LG LIQUID >= 10% TOC
0018
0039
0040

REATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
118 P-DICHLOROBENZENE
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
250 CADMIUM
251 CHROMIUM (TOTAL)
255 LEAD
257 BENZENE

NOTES

PLEASE NOTICE: THIS LDR EXPIRES ON 12/31/2000.

Terry G. Barrett
GENERATOR'S AUTHORIZED
SIGNATURE

Terry G. Barrett
NAME & TITLE
(PRINTED OR TYPED)

12, 27, 00
DATE

Q#: 5974 LOC: 619501

TERR: 02 REF#: 5141470 SW: 0052

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

6-195-01

26833

496

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

00496

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

KSD984972737

Manifest Document No.

18778

2. Page 1
of 1Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

PANHANDLE EASTERN
3 MI N. 1 1/2 MI W. OF OLP RR1 BOX 174 A
OLPE KS 66865

4. Generator's Phone (316) 475-3226

5. Transporter 1 Company Name

SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number

SCR000075150

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

SAFETY-KLEEN SYSTEMS, INC
1311 S ANNA
WICHITA, KS 67209

10. US EPA ID Number

KSD000809723

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone 316 942-5001

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

316 942-5001

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers
No. Type13. Total
Quantity14. Unit
Wt/Vol

1. Waste No.

a. X HM
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII RQ
(D001)ERG#128 (6.7#/GL) (D018, D039, D040)

5

DM

72

G

D001
D039

J. Additional Descriptions for Materials Listed Above

I(A) D018 D040

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

IF UNDELIVERABLE, RETURN TO GENERATOR. FOR RECYCLE
EMERGENCY RESPONSE#800-468-1760 24HR.

0124 100723925 0017778178 0002033068 04

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Vicki L. Jacobs

Signature

Vicki L. Jacobs

Date

Month Day Year
6 19 01

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

RANDALL S. SHARPING

Signature

[Signature]

Date

Month Day Year
06 19 01

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Blank]

Signature

[Blank]

Date

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Scott VINCENT

Signature

[Signature]

Date

Month Day Year
10 6 19 01

54474-R5732
LOCATION: 619501

SAFETY-KLEEN
LDR NOTIFICATION FORM

05/19/01 PAGE: 1
14:50:43

GENERATOR NAME: PANHANDLE EASTERN

MANIFEST NO.: ~~2878~~ 00496
OR SALES SERVICE NO.: 17778178

CUST#: 0002-0330-68

IN PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

OR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000801

HA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
0001 LQ LIQUID >= 10% TOC
0018
0039
0040

REATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

100 0-CRESOL
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
247 ARSENIC
250 CADMIUM
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER
27 BENZENE

-----NOTES-----
P NOTICE: THIS LDR EXPIRES ON 12/31/2001.

Vicki Jacobs Vicki Jacobs Adm Asst. 6 / 19 / 01
GENERATOR'S AUTHORIZED NAME & TITLE DATE
SIGNATURE (PRINTED OR TYPED)

Q#: 3551 LDC: 619501

TERR: 04 REF#: 17778178 SW: 0124

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. KSD984972737		Manifest Document No. 00470 17747		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address PANHANDLE EASTERN 3 MI N. 1 1/2 MI W. OF OLP RR1 BOX 174 A OLPE KS 66865						A. State Manifest Document Number							
4. Generator's Phone (316 475-3226						B. State Generator's ID							
5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC			6. US EPA ID Number SCR000075150			C. State Transporter's ID							
7. Transporter 2 Company Name			8. US EPA ID Number			D. Transporter's Phone 316 942-5001							
9. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC 1311 S ANNA WICHITA, KS 67209			10. US EPA ID Number KSD000809723			E. State Transporter's ID							
						F. Transporter's Phone							
						G. State Facility's ID							
						H. Facility's Phone 316 942-5001							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. HM X WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII RG (D001)ERG#128 (6.7#/GL) (D018, D039, D040)						3		DM		68		G D001 D039	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above I (A) D018 D040						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information IF UNDELIVERABLE, RETURN TO GENERATOR FOR RECYCLE EMERGENCY RESPONSE#800-468-1760 24HR. 0112 100344536 0006007282 0002033068 04													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name Wicki Jacobs						Signature <i>Wicki Jacobs</i>						Date 3/21/01	
17. Transporter 1 Acknowledgement of Receipt of Materials												Date	
Printed/Typed Name REYNOLD S. SHERPINE						Signature <i>Reynold S. Sherpine</i>						Month Day Year 03/21/01	
18. Transporter 2 Acknowledgement of Receipt of Materials												Date	
Printed/Typed Name						Signature						Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name Coralie White						Signature <i>Coralie White</i>						Month Day Year 13/22/01	

4474-R5732
CATION: 619501

SAFETY-KLEEN
LDR NOTIFICATION FORM

02/24/01 PAGE: 1
08:27:47

GENERATOR NAME: PANHANDLE EASTERN

MANIFEST NO.: 00470
OR SALES SERVICE NO.: 6007282

CUST#: 0002-0330-68

IN ACCORDANCE TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
SOLID WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

R FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000801

A WASTE CODES & LDR SUBCATEGORIES (IF ANY):
001 LQ LIQUID >= 10% TOC
018
039
040

EATABILITY GROUP: NONWASTEWATERS

SPECIFIC CONSTITUENT NOTIFICATION:

00 0-CRESOL
29 TETRACHLOROETHYLENE
37 TRICHLOROETHYLENE
47 ARSENIC
50 CADMIUM
55 LEAD
57 MERCURY - ALL OTHERS
60 SILVER
7 BENZENE

NOTES

NOTICE: THIS LDR EXPIRES ON 12/31/2001.

Wicki Jacobs Wicki Jacobs Adm Asst 03, 21, 01
GENERATOR'S AUTHORIZED NAME & TITLE DATE
SIGNATURE (PRINTED OR TYPED)

3911 LOC: 619501

TERR: 04 REF#: 6007282 SW: 0112

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

ATTACHMENT 2

-195-01

ase print or type. (Form designed for use on elite (12-pitch) typewriter.)

00359

Form Approved. OMB No. 2050-0039 Expires 9-30-99

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

KSD984972737

Manifest Document No.

04292

2. Page 1
of 1

Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

PANHANDLE EASTERN
3 MI N. 1 1/2 MI W. OF OLP RR1 BOX 174 A
OLPE KS 66865

A. State Manifest Document Number

B. State Generator's ID

4. Generator's Phone (

316 475-3226

5. Transporter 1 Company Name

SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number

II D984908202

C. State Transporter's ID

D. Transporter's Phone 316 942-5001

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

619501
SAFETY-KLEEN SYSTEMS, INC
1311 S ANNA
WICHITA, KS 67209

10. US EPA ID Number

KSD000809723

G. State Facility's ID

H. Facility's Phone

316 942-5001

11. US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)

12. Containers
No. Type

13.
Total
Quantity

14.
Unit
Wt/Vol

1.
Waste No.

a. HM

X

RQ WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII(D001)
(D006, D008, D018, D027, D039D040) (ERG#128)

3

DM

62

G

D001

D039

J. Additional Descriptions for Materials Listed Above

I (A) D018 D006

(A) D008, D027, D040

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

IF UNDELIVERABLE, RETURN TO GENERATOR. FOR RECYCLE
EMERGENCY RESPONSE#800-468-1760 24HR.

9944 97927641 0000504292 6195013451 02

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Vicki L. Jacobs

Signature

Vicki L. Jacobs

Date

Month Day Year
11 3 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Gilbert Baeza

Signature

Gilbert Baeza

Date

Month Day Year
11 3 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Scott Vincent

Signature

Scott Vincent

Month Day Year

11 3 99

K5474-R5732
LOCATION: 619501

SAFETY-KLEEN
LDR NOTIFICATION FORM

10/11/99 PAGE: 1
11:54:56

GENERATOR NAME: PANHANDLE EASTERN

MANIFEST NO.:
OR SALES SERVICE NO.: 504292

CUST#: 6-195-01-3451

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000

SKDOT#: 0010083

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):

D001
D006
D008
D018
D027
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSITITUENT NOTIFICATION: NONE

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/1999.

V. Vick Jacob
GENERATOR'S AUTHORIZED
SIGNATURE

NAME & TITLE
(PRINTED OR TYPED)

11, 3, 99
DATE

SEQ#: 4736 LOC: 619501

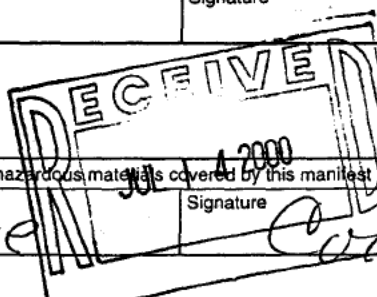
TERR: 02 REF#: 504292 SW: 9944

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFE

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. KSD984972737		Manifest Document No. 40587		2. Page 1 of 1 Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address PANHANDLE EASTERN 3 MI N. 1 1/2 MI W. OF OLP RR1 BOX 174 A OLPE KS 66865				A. State Manifest Document Number 73740587			
				B. State Generator's ID			
4. Generator's Phone (316) 475-3226				C. State Transporter's ID			
5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC		6. US EPA ID Number SCR000075150		D. Transporter's Phone 316 942-5001			
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID			
9. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC 1311 S ANNA WICHITA, KS 67209		10. US EPA ID Number KSD000809723		F. Transporter's Phone			
				G. State Facility's ID			
				H. Facility's Phone 316 942-5001			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total	
				No. Type		Quantity	
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII RQ (D001)ERG#128 (6.7#/GL) (D018, D039, D040)				3 DM		68 G	
b. WDR 1025745							
c.							
d.							
J. Additional Descriptions for Materials Listed Above I(A) D018 D040				K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information IF UNDELIVERABLE, RETURN TO GENERATOR FOR RECYCLE EMERGENCY RESPONSE#800-468-1760 24HR. 0028 99178113 0003340587 0002033068 02							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name Vicki L. Jacobs				Signature <i>Vicki L. Jacobs</i>		Date Month Day Year 7/11/00	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Red Emerly</i>		Date Month Day Year 7/11/00	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name Coralee White				Signature <i>Coralee White</i>		Date Month Day Year 7/11/00	



INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

K54474-R5732.
LOCATION: 619501

SAFETY-KLEEN
LDR NOTIFICATION FORM

06/19/00 PAGE: 1
07:05:08

GENERATOR NAME: PANHANDLE EASTERN

MANIFEST NO.:
DR SALES SERVICE NO.: 3340587

CUST#: 0002-0330-68

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:
102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
118 P-DICHLOROBENZENE
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
250 CADMIUM
251 CHROMIUM (TOTAL)
255 LEAD
67 BENZENE

-----NOTES-----
EXP NOTICE: THIS LDR EXPIRES ON 12/31/2000.

Richard L. Jacobs
GENERATOR'S AUTHORIZED
SIGNATURE

NAME & TITLE
(PRINTED OR TYPED)

7/1/00
DATE

SEQ#: 5418 LOC: 619501

TERR: 02 REF#: 3340587 SW: 0028

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

Forward to Definer - Houston Env. 7/24/00

ATTACHMENT 3

FIRE EXTINGUISHER INSPECTION

JANUARY
2001

7-29 9/85

ation Reporting OLPE HANSITS Date 2-5-01
ANNUAL INSPECTIONS

Location (Building or Type Vehicle)	Size	Type	Serial Number	Date of Hydrostatic Test	Next Test	Condition
1 MER #1 by 603 North Door	1961	30-D	D520711	05-12-97	09	OK JC
2 MER #1 by 605 North Door	1960	30-D	B380424	04-22-98	10	OK JC
3 MER #1 by 609 North Door	1960	30-D	B380425	05-12-97	09	OK JC
4 MER #1 by 613 North Door	1965	30-D	L317912	04-22-98	10	OK JC
5 MER #1 by 617 North Door	1960	30-D	B674348	04-22-98	10	OK JC
6 MER #1 by Northeast Door	1966	30-E	P560860	06- -90	02	OK JC
7 MER #1 by 620 South Door	1972	30-E	--	05-12-97	09	OK JC
8 MER #1 by 616 South Door	1967	30-E	P580844	06- -90	02	Repaired 2/11/99 OK JC
9 MER #1 by 614 South Door	1962	30-D	E328034	04-22-98	10	OK JC
10 MER #1 by 612 South Door	1962	30-D	E328259	10-28-96	08	OK JC
11 MER #1 by 610 South Door	1960	30-D	B674371	04-22-98	10	OK JC
12 MER #1 by 606 South Door	1960	30-D	B380451	05-12-97	09	OK JC
13 MER #1 Southwest Door	1971	30-E	--	03- -93	05	OK JC
14 MER #1 Basement by SW Door	1962	30-D	E328151	04-22-98	10	OK JC
15 MER #1 Bsmt under 613 S. door	1960	30-D	B674373	04-22-98	10	OK JC
16 MER #1 Basement SE Door	1966	30-E	P560814	04-22-98	10	OK JC
17 MER #1 Bsmt Northeast Corner	1964	30-D	K273862	06- -90	02	OK JC
18 MER #2 Southeast Door by 624	1965	30-D	M92875	06- -90	02	OK JC
19 MER #2 East Door btwn 624/623	1968	30-E	--	03- -93	05	OK JC
20 MER #2 East Door btwn 623/622	1966	30-E	P560849	06- -90	02	OK JC
21 MER #2 East Door by 621	1965	30-D	M92453	05-12-97	09	OK JC
22 MER #2 Northwest Door	1960	30-D	B380448	05-12-97	09	OK JC
23 MER #2 West Door by 621	1961	30-D	D520470	04-22-98	10	OK JC
24 MER #2 West Door by 622	1960	30-D	B583443	05-12-97	09	OK JC
25 MER #2 West Door by 623	1968	30-E	--	03- -93	05	OK JC
26 MER #2 West Wall by 624	1968	30-E	--	03- -93	05	OK JC
27 MER #2 Southwest Door by 624	1966	30-E	P560836	06- -90	02	OK JC
28 Cob House North Door	1964	30-D	K276120	1-25-00	12	OK JC
29 Cob House South Door	1973	30-E	--	05-12-97	09	OK JC
30 Old Shop East Door	1960	30-D	B674331	05-12-97	09	OK JC
31 Plant Locker Room <u>SPARE</u>	1961	30-D	D520444	04-22-98	10	OK <u>NOT</u>
32 Gasket Room	1973	30-E	--	05-12-97	09	Repaired 2/11/99 OK JC
33 Aux Eng Room Northwest Door	1967	30-E	P560855	06- -90	02	OK JC
34 Aux Eng Room N. Door by 626	1973	30-E	--	05-12-97	09	OK JC

Fire Protection System

Water Hoses	Inspected
Fire Pump	Inspected
Halon System	Inspected

Date of Inspection: 2-5-01 - JERRY COMMER FORD
SCOTT HUDSON

Remarks: #31 is now A SPARE FIRE

EXTINGUISHER - WHEN LOCKER
ROOM WAS REMODELED IT WAS
DECIDED TO NOT PUT IT BACK

Supervisor _____ Date _____

7-29 9/85

FIRE EXTINGUISHER INSPECTION

JANUARY
2001

Inspection Reporting

Date 2-5-01

ANNUAL INSPECTION

Location (Building or Type Vehicle)	Size	Type	Serial Number	Date of Hydrostatic Test	Next Test	Condition
35 Aux Eng Room Northeast Door	1960	30-D	B380439	05-12-97	09	OK JC
36 Aux Eng Room S. Door by 626	1962	30-E	E328265	05-12-97	09	OK JC
37 Machine Shop Small East Door	1966	30-D	N685174	05-12-97	09	AI-SH-2501
38 Machine Shop South Door	1960	30-D	B36469	04-22-98	10	AI-SH-2501
39 Machine Shop West Door	1973	30-E	--	05-12-97	09	AI-SH-2501
40 Area Office	1973	Sentry 10	AZ581976	06- -90	02	AI-SH-1-10-01
41 12-1	1973	30-E	--	04-22-98	10	AI-SH-2501
42 VACANT	1969	30-E	--	04- -91	03	
43 Vacant						
44 Vacant						
45 Vacant						
46 Vacant						
47 Gas Tank on Hill	1973	30-E	---	04-22-98	10	AI-SH-2501
48 8-1	1975	30-E	15997	02-11-99	11	DELETE #48
49 Vacant						
50 VACANT	1977	Sentry 10	--	04- -91	03	
51 Spare	1971	30-E	--	05-12-97	09	#51 7088 ON 2-1 OK JC
52 8-2	1982	30-E	EB093876	04- -94	06	OK JC
Diesel Tank - 200 Discharge	1971	30-E	--	05-12-97	09	AI-SH-2501
54 Paint Shed & Barrel Rack	1983	30-E	EN863923	04- -94	06	OK JC
55 Encal Building	1986	Sentry 10	GA00205992	04- -91	03	AI-SH-1-10-01
56 Calorimeter Building	1987	Sentry 10	HH00008605	11- -92	04	AI-SH-1-10-01
57 West Wall in Opr A's Office	1990	SY-0243	S-975426	06- -90	02	AI-SH-1-10-01
58						
59						

Fire Protection System

Water Hoses Inspected
Fire Pump Inspected
Halon System Inspected

Date of Inspection:

2-5-01

Remarks:

#48 HAS BEEN DELETED OFF
UNIT 8-1 - AND #51 SPARE HAS
BEEN PERMANENTLY ASSIGNED TO
UNIT 8-1

Supervisor _____

Date _____

FIRE EXTINGUISHER INSPECTION

7-29 9/85

Location Reporting OLPE, ITS.

Date FEBRUARY 2001

Location (Building or Type Vehicle)	Size	Type	Serial Number	Date of Hydrostatic Test	Next Test	Condition
1 MER #1 by 603 North Door	1961	30-D	D520711	05-12-97	09	OK-SH
2 MER #1 by 605 North Door	1960	30-D	B380424	04-22-98	10	OK-SH
3 MER #1 by 609 North Door	1960	30-D	B380425	05-12-97	09	OK-SH
4 MER #1 by 613 North Door	1965	30-D	L317912	04-22-98	10	OK-SH
5 MER #1 by 617 North Door	1960	30-D	B674348	04-22-98	10	OK-SH
6 MER #1 by Northeast Door	1966	30-E	P560860	06- -90	02	OK-SH
7 MER #1 by 620 South Door	1972	30-E	--	05-12-97	09	OK-SH
8 MER #1 by 616 South Door	1967	30-E	P560844	06- -90	02	Repaired 2/11/99 OK-SH
9 MER #1 by 614 South Door	1962	30-D	E328034	04-22-98	10	OK-SH
10 MER #1 by 612 South Door	1962	30-D	E328259	10-28-96	08	OK-SH
11 MER #1 by 610 South Door	1960	30-D	B674371	04-22-98	10	OK-SH
12 MER #1 by 606 South Door	1960	30-D	B380451	05-12-97	09	OK-SH
13 MER #1 Southwest Door	1971	30-E	--	03- -93	05	OK-SH
14 MER #1 Basement by SW Door	1962	30-D	E328151	04-22-98	10	OK-SH
15 MER #1 Bsmt under 613 S. door	1960	30-D	B674373	04-22-98	10	OK-SH
16 MER #1 Basement SE Door	1966	30-E	P560814	04-22-98	10	OK-SH
17 MER #1 Bsmt Northeast Corner	1964	30-D	K273862	06- -90	02	OK-SH
18 MER #2 Southeast Door by 624	1965	30-D	M92875	06- -90	02	OK-SH
19 MER #2 East Door btwn 624/623	1968	30-E	--	03- -93	05	OK-SH
20 MER #2 East Door btwn 623/622	1966	30-E	P560849	06- -90	02	OK-SH
21 MER #2 East Door by 621	1965	30-D	M92453	05-12-97	09	OK-SH
22 MER #2 Northwest Door	1960	30-D	B380448	05-12-97	09	OK-SH
23 MER #2 West Door by 621	1961	30-D	D520470	04-22-98	10	OK-SH
24 MER #2 West Door by 622	1960	30-D	B583443	05-12-97	09	OK-SH
25 MER #2 West Door by 623	1968	30-E	--	03- -93	05	OK-SH
26 MER #2 West Wall by 624	1968	30-E	--	03- -93	05	OK-SH
27 MER #2 Southwest Door by 624	1966	30-E	P560836	06- -90	02	OK-SH
28 Cob House North Door	1964	30-D	K276120	01-25-00	12	OK-SH
29 Cob House South Door	1973	30-E	--	05-12-97	09	OK-SH
30 Old Shop East Door	1960	30-D	B674331	05-12-97	09	OK-SH
31 Spare	1961	30-D	D520444	04-22-98	10	OK-SH
32 Gasket Room	1973	30-E	--	05-12-97	09	Repaired 2/11/99 OK-SH
33 Aux Eng Room Northwest Door	1967	30-E	P560855	06- -90	02	OK-SH
34 Aux Eng Room N. Door by 626	1973	30-E	--	05-12-97	09	OK-SH

Fire Protection System

Water Hoses Inspected
Fire Pump Inspected
Halon System Inspected

Date of Inspection:

2-5-6-9-01

Remarks:

Supervisor

J. T. [Signature]

Date

2/28/01

Location Reporting OLPE, ITS.

Date FEBRUARY 2001

Fire Protection System

2-5+6+9-01

Remarks:

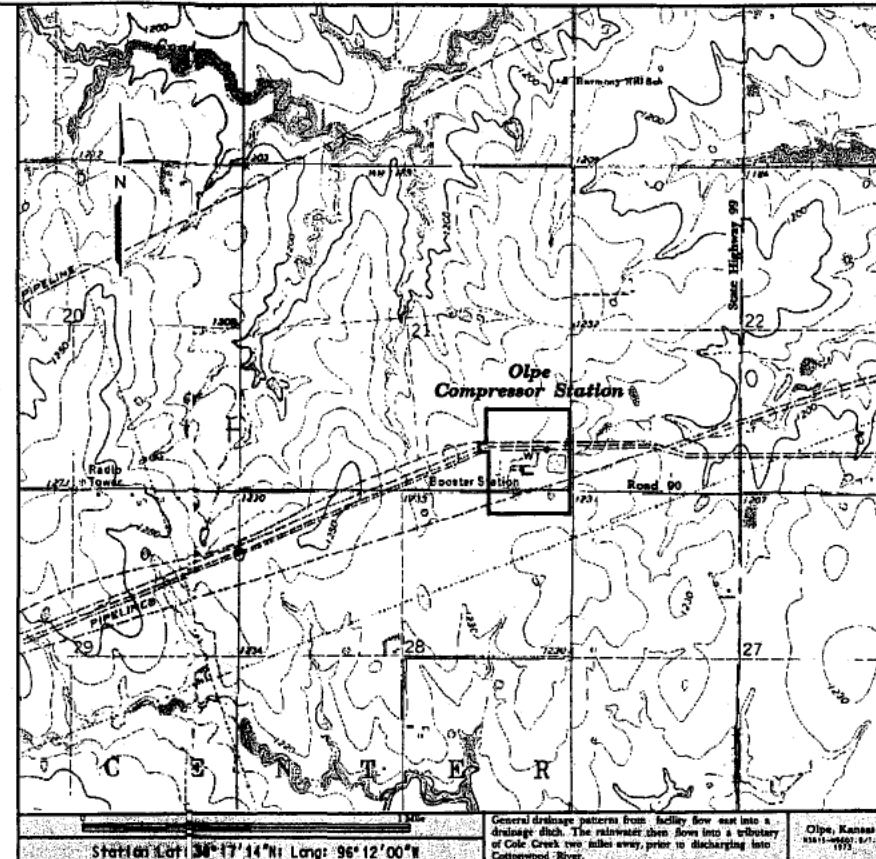
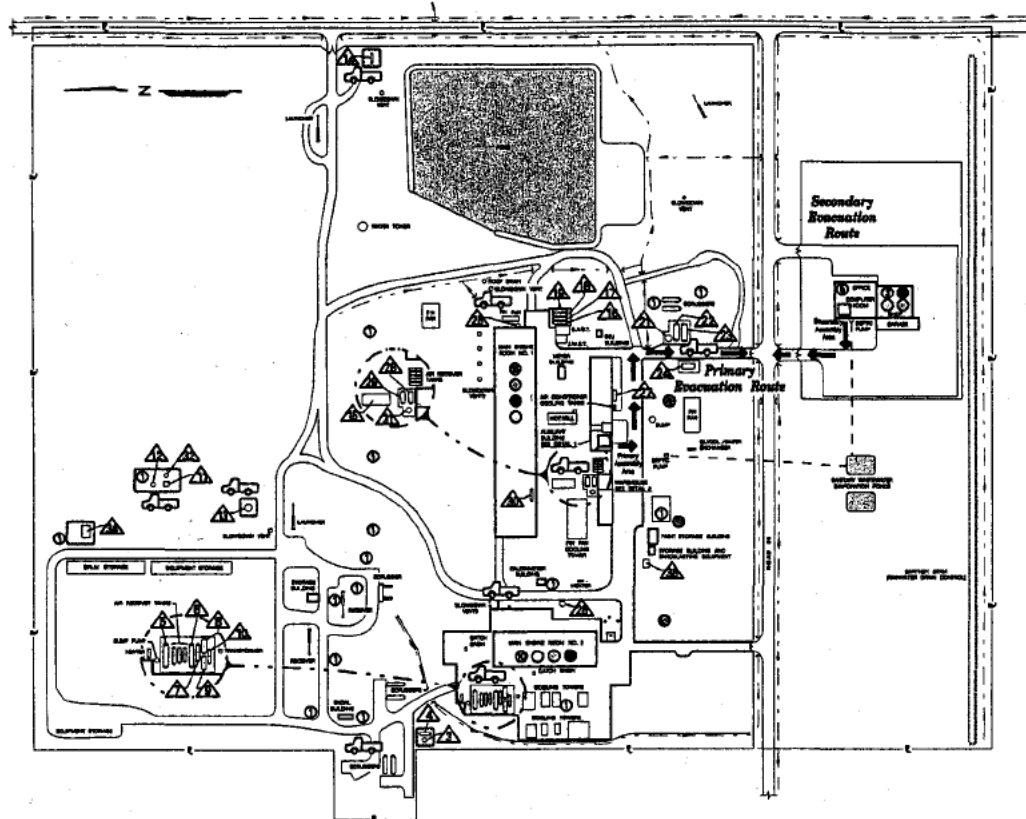
Water Hoses	Inspected
Fire Pump	Inspected
Halon System	Inspected

Supervisor

Date 2/28/01

ATTACHMENT 4

SPILL PROCEDURES



Panhandle Eastern Emergency Contacts

"On Call" Emergency Coordinator
Contact Panhandle Eastern Pipe Line Company, Gas Control Department, Dispatcher in Houston, Texas at (713) 627-5623 to contact the designated "On Call" Emergency Coordinator.

Local Authorities

Lyon County Sheriff's Dept.
8th and Main
Emporia, Kansas
(316) 342-8548

Newman Memorial County Hosp.
12th and Chestnut
Emporia, Kansas
(316) 343-8800

Emporia Fire Department
822 Main
Emporia, Kansas
(316) 342-4108

Olpe Fire Department
Olpe, Kansas
(316) 478-3322

Distribution/Training/Updates

A copy of this plan and revision will be distributed as follows:

Distribution	Responsibilities
Emergency Coordinator (Station)	<ul style="list-style-type: none">Review this plan with new facility employees before beginning employment.Review this plan with all facility personnel annually.Document employee review and maintain in the Environmental Filing System.Review and provide a copy of this plan to the Local Authorities listed above.Maintain agency correspondence (acknowledgment of receipt, etc.) in the Environmental Filing System.
Environmental Compliance Department Deletion Manager - Transmission	<ul style="list-style-type: none">Ensure that the plan meets regulatory requirements.Ensure the plan is up to date in one of the following areas:<ul style="list-style-type: none">A facility change which materially increases the potential for a spill, fire, hazardous waste release or other emergency.A change in emergency coordinator or local authorities.A change in emergency equipment.An increase in storage capacity of oil, hazardous waste, or hazardous material.A change in applicable regulations as determined by the Environmental Compliance Department.A spill occurs at this facility which requires regulatory notification.
Area Superintendent - Transmission	<ul style="list-style-type: none">Maintain a copy of the approved plan and all revisions.
Local Authority (Listed Above)	<ul style="list-style-type: none">Maintain a copy of the approved plan and all revisions.
Transmission - Technical Services	<ul style="list-style-type: none">Maintain a copy of the approved plan and all revisions.

Preparedness and Prevention

Preventive Measures at Potential Emergency Spill Area

STORAGE FACILITIES

Dwg. ID	Facility #	Contents	Capacity (Gals)	Secondary Containment *	Tank ** Inspections	Overflow Prevention Device (OPD)	OPD Testing
4	1	Pipeline Liquids Tank	8,400	Earthen Dike	Weekly	Direct Vision Gage	Routinely
5	2	Lube Oil Tank	8,590	Concrete Dike	Weekly	Direct Vision Gage	Routinely
6	3	Lube Oil Tank	8,590	Concrete Dike	Weekly	Direct Vision Gage	Routinely
7	4	Lube Oil Tank	2,821	Concrete Dike	Weekly	Direct Vision Gage	Routinely
8	5	Glycol Tank	4,398	Concrete Dike	Weekly	Direct Vision Gage	Routinely
9	6	Glycol Tank	4,398	Concrete Dike	Weekly	Direct Vision Gage	Routinely
10	7	Glycol Tank	2,821	Concrete Dike	Weekly	Direct Vision Gage	Routinely
11	8	Glycol Tank	2,068	Concrete Dike	Weekly	Direct Vision Gage	Routinely
12	9	Diesel Tank	141	Earthen Dike	Weekly	Direct Vision Gage	Routinely
13	10	Gasoline Tank	990	Earthen Dike	Weekly	Direct Vision Gage	Routinely
14	11	Diesel Tank	470	Earthen Dike	Weekly	Direct Vision Gage	Routinely
15	12	Glycol Tank	2,068	Concrete Dike	Weekly	Direct Vision Gage	Routinely
16	13	Lube Oil Tank	2,068	Concrete Dike	Weekly	Direct Vision Gage	Routinely
17	14	Glycol Tank	2,068	Concrete Dike	Weekly	Direct Vision Gage	Routinely
18	15	Pipeline Liquids Tank	2,868	Concrete Dike	Weekly	Direct Vision Gage	Routinely
19	16	Lube Oil Tank	8,576	Concrete Dike	Weekly	Direct Vision Gage	Routinely
20	17	Lube Oil Tank	8,576	Concrete Dike	Weekly	Direct Vision Gage	Routinely
21	18	Methanol Tank	3,728	Concrete Dike	Weekly	Direct Vision Gage	Routinely
22	19	Glycol Tank	940	****	Weekly	Direct Vision Gage	Routinely
23	20	Used Oil Tank	1,024	Concrete Dike	Weekly	Direct Vision Gage	Routinely
24	21	Used Oil Tank	1,488	Concrete Dike	Weekly	Direct Vision Gage	Routinely
25	22	Used Oil Tank	1,000	Basement of MER #1	Weekly	Direct Vision Gage	Routinely
26	23	Used Oil Tank	3,000	Concrete Dike	Weekly	Direct Vision Gage	Routinely
27	24	Diesel Tank (Portable)	80	Earthen Dike	Weekly	Direct Vision Gage	Routinely
28	25	Wastewater Tank	1600	Double Wall Vessel	Daily	Direct Vision Gage	Routinely
29	26	Wastewater / Oil Tank	3,364	Earthen Dike	Daily	Gage Stick	Routinely
30	27	Wastewater / Oil Tank	45,858	****	Daily	Gage Stick	Routinely
31	28	Wastewater / Oil Tank	1,580	Earthen Dike	Daily	Gage Stick	Routinely
32	29	Used Oil Tank	160	****	Weekly	Gage Stick	Routinely
33	30	Used Oil Tank	752	****	Weekly	Gage Stick	Routinely

Emergency Spill Response Equipment

Dwg. ID	Equipment Location	Inspections
1	First Aid Kit	Monthly
2	Eye Wash Station	Monthly
3	Fire Extinguishers (Number at this location)	Monthly
4	Fire Blankets	Monthly
5	Spill Response Equipment (At a minimum: absorbent material, booms, spill pads, rakes, shovel, portable pump, PPE, empty drums.)	Monthly
6	Emergency Generator	Monthly
7	Emergency Shutdown Activation Stands	Semi-Annually

Station Security and Lighting

The station is completely surrounded by fence. The main gate is open from 7:00 am - 4:00 pm, Monday through Friday. All visitors must:

- Sign registry at Office Building and Operator A Office.
- Be briefed on emergency procedures, including Primary and Secondary Assembly Areas and Primary Evacuation Routes.

The station has adequate lighting with flood lights throughout the station.

Communication Equipment

Plant Phone System consists of:

- A public system and a company owned microwave system.
- Phone system with horn - located in Office, MER #1, MER #2, and the Auxiliary Building.
- Phone system with light - located in MER #1 and MER #2.

Two Way Radio System consists of:

- Radio in Office Building.
- Radio in Operator 'A' Office.

Air Horns for signaling emergencies are located at MER #1 and MER #2 and are routinely tested.

Spill History

Spills occurring at this facility on July 06, 1993 and December 12, 1994 required implementation of the contingency plan. The spills were controlled; appropriate agencies notified and corrective actions taken to prevent the spill incident from recurring. The facility's Environmental File #2 Reportable Spills and Releases, contains copies of the reports and corrective actions taken.

DRIVING DIRECTIONS TO STATION

From Olpe, Kansas, travel 3 miles north on State Highway 99. Turn west on Road 90 and travel 1.5 miles.

LOADING /UNLOADING AREAS

Dwg. ID	The Primary Emergency Coordinator shall ensure company employees:
1	Supervise all loading and unloading operations.
2	Utilize drip pans at the hose connections while loading /unloading liquids.
3	Inspect all outlets prior to leaving the loading areas to prevent possible leakage from the truck, tanks and containers.

Contingency and Response

Spills that meet the following criteria must be reported immediately to Environmental Compliance Houston.

- Creates a sheen on water.
- One (1) pound or more of solid waste spilled on land.
- Five (5) gallons or more of a liquid spilled on land.

First Responder - Emergency /Spill Discovery

- Assess the situation to determine if the situation poses an immediate threat to human health or the environment.
- Identify hazardous substances involved, if any.
- Report the emergency or spill to the Emergency Coordinator immediately.
- Standby at a safe distance and keep others away.
- Activate emergency shutdown, if necessary.

Emergency Response Coordinator

- Assess situation for potential threat to human health and the environment.
- Implement evacuation, if necessary.
- Activate emergency shutdown, if necessary.
- Ensure personnel safety.
- Control source as conditions warrant.
- Coordinate pipeline /plant operations.
- Notify local authorities, if necessary.
- Notify Area /Division /Environmental Compliance. Report spill information according to the Environmental Standard Operating Procedures.
- For fire or explosions, refer to the emergency plan section of the Operations and Maintenance Plan.

For spills:

- Ensure that waste or product which may be incompatible with a released material is kept away from the affected area.
- Keep any potential ignition source away from emergency area, if spilled material is flammable.
- Apply water fog over spill to reduce vapor, if necessary.
- Minimize affected area with appropriate containment or diking.
- Assemble required spill response equipment as required (protective clothing, gear, heavy equipment, pumps, absorbent mat, empty drums, etc.)
- Coordinate cleanup.
- Place spilled material in appropriate containers, in accordance with the Environmental Standard Operating Procedures.
- Label and store containers in accordance with the Environmental Standard Operating Procedures.
- Coordinate waste disposal and equipment decontamination with Environmental Compliance.
- Terminate response.
- Ensure that all emergency response equipment is fully functional. Any equipment that cannot be reused shall be replaced.
- Initiate internal written report or Field Spill Report Form.
- For spills of PCB's, contact Environmental Compliance for special spill response requirements related to PCB spills.

Local Authorities

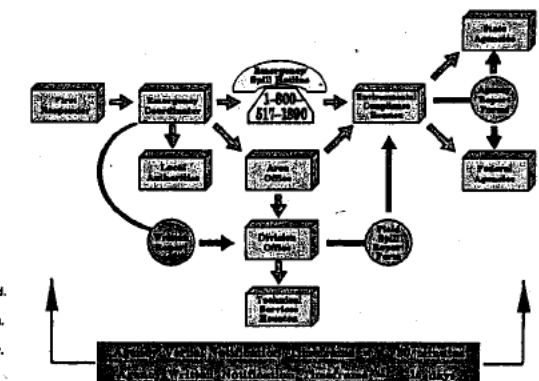
- Coordinate access and security.
- Assist with emergency hazardous materials handling, fire fighting, etc.

Area /Division

- Obtain equipment and personnel as needed.
- Assist with pipeline operations.
- Send internal written report within 3 days to Environmental Compliance.
- Notify Technical Services - Houston.

Environmental Compliance

- Notify State and Federal Agencies, as required.
- Coordinate sampling activities.
- File State and Federal Agency written reports.
- Coordinate waste disposal and equipment decontamination with Emergency Coordinator.



PHOTOCOPY

ORIGINAL ON FILE AT E.H.S. DEPARTMENT
PANHANDLE EASTERN PIPE LINE COMPANY

Signature: _____ Date: _____

Witness: _____ Date: _____

Approved: _____ Date: _____

By: _____

For: _____

Scale: _____

Sheet: 1 of 1

PANHANDLE EASTERN PIPE LINE COMPANY

2600 Westchester Dr., Houston, TX 77060-8300

OLPE COMPRESSOR STATION

Lyon County, Kansas
960 Road 90, Olpe, Kansas 66860
Start of Operation Date: 1936

SPCC Plan, Preparedness, Prevention and Contingency Plan, Emergency Procedures

Drawn By: TMR Date: 11-20-98
Checked By: _____ Revision Date: 09-24-00
Scale: NTS
Sheet: 1 of 1

OLPESPPC

Ex. 6
PH

ATTACHMENT 5

PANHANDLE EASTERN CORPORATION

POSITION DESCRIPTION

Position Title: Area Supervisor

Job No.: [REDACTED]

Reports To: Area Superintendent

Date:

EX. 6 PII

Department: Transmission

FLSA Status:

Division: Field Operations

Approval:

Section: Area

Approval:

Position Summary:

The Area Supervisor reports to the Area Superintendent as do the Area Foreman (1 - 3), other Area Supervisors (1 - 4), and some area technicians and administrative staff. Areas are geographic territories of pipeline, compressor, measuring facilities, gas treating facilities and storage facilities. Through subordinate positions incumbent operates and maintains facilities associated with gathering, treating, transporting, storing and delivering gas. Dimensions: Area is comprised of an operating budget of \$4.0 MM, a capital budget of \$100,000, and 45 -90 employees. Staff is comprised of 7 - 20 non-exempt employees.

Duties and Responsibilities:

1. To supervise and direct the operation and maintenance activities of the Area. Monitors the operation, maintenance and construction activities of the Area to ensure resources are available when needed, projects are on schedule, that gas receipt/delivery volumes are met, that Area standards for efficiency are met, and that projects are being done in accordance with original specifications. Problems are reviewed with the Area Superintendent along with corrective actions taken.
2. Incumbent assists the Area Superintendent in establishing goals and objectives for Area gas volume deliveries, operations and maintenance standards, staffing levels, job performance, and facility changes. Incumbent will develop action plans to meet Area, Division and Department goals.
3. Reviews subordinate "work plans" and prepares additional information for Superintendent to produce the Area "work plan" and annual budgets. Incumbent meets with Superintendent monthly to review actual results versus planned activities and to adjust future activities to an expenditure level consistent with operations and to meet company operation and maintenance requirements.

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Area Supervisor

4. Incumbent implements Area safety program to provide information and training to our employees for performing their job functions; to inform the general public on the potential dangers of a natural gas pipeline and associated facilities through public awareness programs; to conduct monthly safety meetings; and to assist the area safety committee resolve safety problems.
5. Incumbent maintains the Area "emergency plan" and conducts training and simulated emergencies to ensure proper response to any pipeline failure. Incumbent with Superintendent, subordinates, safety committee, and/or Division Technical Staff, investigates accidents for cause and prevention.
6. Incumbent implements personnel policies - job performance standards, training programs, discipline and reward practices, identifies employees for advancement, listens to employee concerns, promotes "teamwork" and complies with employee relations policies (PFPI - "Articles of Agreement"). Incumbent investigates personnel issues to ensure that facts are known prior to resolution. On issues not clearly defined incumbent consults with the Area Superintendent, Employee Relations Representative, the Division Administrative Superintendent, or the Division Manager.
7. Incumbent works with Superintendent and Division staff to communicate company policies and procedures to employees. Incumbent trains employees to perform activities consistent with the stated policies and procedures.
8. Incumbent with subordinates prepares detailed plans for facility outages, pipeline and engine maintenance. Plans are reviewed with Superintendent and/or Division Staff to ensure scope of work is complete, safety precautions are complete, required personnel are notified, dates for returning to service are realistic, and facility outages do not adversely affect ability to transport gas.
9. Incumbent maintains good public relations with landowners, producers, other pipelines, utilities and the general public. Works to maintain a good corporate image and minimize damages relating to construction or maintenance work. Receives inquiries from the public concerning our facilities and responds quickly to ensure safety to our employees and facilities and the general public.
10. Incumbent monitors "operation and maintenance agreements" and contracts for services to ensure that both parties are meeting the contract requirements. Problems are discussed with contractor, and if unable to resolve will involve Superintendent or Division Administrative Supervisor.

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Area Supervisor

11. The incumbent functions without daily direction from Superintendent provided that objectives are met and that activities are consistent with approved work plans and budgets. Incumbent works with other Area Supervision to provide 24 hour response to problems. Incumbent works directly with other Area Supervisors, Division Engineers and Technicians, Construction Engineering, Employee Relations Representative, Administrative Supervisors and Administrative Superintendent to resolve construction, operations, maintenance and employee issues.

Minimum Qualifications:

Basic education with specialized course work or training in physical sciences, mathematics, mechanical technology, and personnel management. Finance and business administration courses helpful. Five years of responsible operation, maintenance, and administrative experience with two years of supervisor experience.

Reporting Positions:

Total annual payroll of reporting positions up to \$500,000.

Area Technicians (1 - 20): Performs work in specific functions (cathodic protection, controls and/or measurement) ensuring compliance with company policies and standards.

Hourly Personnel (5 -20): Performs various tasks with the area to maintain gas flow and maintenance of facilities.

Administrative Staff (1 - 5): Perform various tasks related to reports and systems development and maintenance.



KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
BUREAU OF WASTE MANAGEMENT
1000 SW JACKSON, SUITE 320, TOPEKA, KANSAS 66612-1366



**USED OIL
COMPLIANCE INSPECTION CHECKLIST**

General

☒ Routine ☐ Complaint

EPA ID KSD 984 972 737 Time 10:45 a.m. Date November 26, 2001

Facility Name CMS Energy/Panhandle Eastern Pipeline District Southeast

Street 985 Road 90 City Olpe Kansas ZIP 66865

Mailing Address (if different than above) P.O. Box 4967, Env. Services, Houston, TX 77210-4967

County Lyon Phone (620) 475-3226

Contact(s) Tom Jenkins - Area Supervisor and Victoria Wagner - Env. Coord. (713) 989-7459

Inspector(s) Victoria S. O'Brien SIC: 4922

Type of Business Natural Gas Compressor Station Number of Employees 18

Has the company declared any information/processes as trade secrets (KSA 65-3447)? No

If yes, explain: _____

TYPE OF STORAGE CONTAINERS:

☐ Drums ☒ Tanks ☐ Other: _____

FACILITY TYPE:

☒ Generator ☐ Collection Center / Aggregation Point
☐ Transporter / Transfer Facility ☐ Used Oil Processor / Re-Refiner
☐ Used Oil Burner (Off-Spec Fuel) ☐ Used Oil Marketer

	Off-Spec Used Oil	On-Spec Used Oil	Oil Filters
Types of Oils: (i.e., motor oil, cooling oil, cutting oil, compressor oil)	Motor, Compressor, and Coolant Oil		Oil Filters
Amount generated per month:	600 to 800 Gallons		≈ 100 Per Year
Amount received from off-site sources:	None		None
Amount presently in storage:	<1000 Gallons		None
Accumulation time:	<Two Months		Not Applicable
Present disposal methods:	Greensburg Oil Services		Drained and 50% Landfilled and 50% Recycled

SUBPART C: STANDARDS FOR USED OIL GENERATORS

YES NO NA

1. Does facility mix hazardous waste with used oil? [40 CFR, 279.21] [] [X] []
 - a. If yes, does facility manage mixture as a hazardous waste? [K.A.R. 28-31-4(p)] [] []
 - A. If no, does the facility fall under the SQG exemption? [] []
2. Does facility store used oil on-site? [40 CFR, 279.22], [X] []

If yes,

 - a. Is the storage unit(s) in good condition? [40 CFR, 279.22(a)] [X] []
 - b. Is the storage unit(s) free from leaks? [279.22(b)] [X] []
 - c. Is the storage unit(s) and/or fill pipe(s) labeled with the words "USED OIL?" [279.22(c)] [X] []
3. Has there been a release of Used Oil? [40 CFR 279.22(d)] [] [X]

If yes,

 - a. Was the leak stopped? [40 CFR 279.22(d)(1)] [] [] []
 - b. Was the release contained? [40 CFR 279.22(d)(2)] [] []
 - c. Was the release cleaned-up and managed properly? [40 CFR 279.22(d)(3)] [] []
 - d. If necessary, was the storage unit repaired or replaced? [40 CFR 279.22(d)(4)] [] [] []
4. Does facility burn used oil on-site? [40 CFR 279.23] [] [X]

If yes,

 - a. Does facility burn only used oil that the generator/operator generates or used oil received from household do-it-yourself used oil generators? [40 CFR 279.23(a)] [] []
 - b. Is the space heater designed to have a maximum capacity of not more than 0.5 million Btu per hour? [40 CFR 279.23(b)] [] []
 - c. Is the combustion gases from the space heater vented to the ambient air? [40 CFR, 279.23(c)] [] []
5. Does generator self-transport used oil to an approved collection site? [40 CFR 279.24(a)] [] [X]

If yes,

 - a. Does the generator transport used oil in a vehicle owned by the generator or an employee of the generator? [40 CFR 279.24(a)(1)] [] []
 - b. Does the generator transport no more than 55 gallons of used oil at any time? [40 CFR 279.24(a)(2)] [] []

NOTE: IF NO TO QUESTION 5-a OR 5-b, COMPLETE TRANSPORTER CHECKLIST.

- c. Does the generator transport used oil to a used oil collection center that is registered, licensed, permitted or recognized by the state to handle used oil? [40 CFR 279.24(a)(3)] [] [X]
6. Does the generator self-transport used oil to an aggregate collection site owned by the generator? [40 CFR 279.24(b)] [] [X]

If yes,

 - a. Does the generator transport used oil in a vehicle owned by the generator or an employee of the generator? [40 CFR 279.24(b)(1)] [] []

YES NO NA

- b. Does the generator transport no more than 55 gallons of used oil at any time? [40 CFR 279.24(b)(2)] ☐ ☐
- c. Does the generator transport used oil to a used oil collection center that is registered, licensed, permitted or recognized by the state to handle used oil? [40 CFR 279.24(b)(3)] ☐ ☐

NOTE: IF TRANSPORTING MORE THAN 55 GALLONS PER TRIP, COMPLETE THE TRANSPORTER/TRANSFER STATION CHECKLIST

7. Does the generator have their used oil reclaimed under a tolling (contractual) agreement? [40 CFR 279.24(c)] ☐ ☒
- If yes,
- a. Does the tolling (contractual) agreement indicate the type of used oil and the frequency of shipments? [40 CFR, 279.24(c)(1)] ☐ ☐
- b. Is the vehicle used to transport the used oil to the processing/re-refining facility and to deliver recycled used oil back to the generator owned and operated by the used oil processor/re-refiner? [40 CFR, 279.24(c)(2)] ☐ ☐
- c. Is reclaimed oil returned to the generator? [40 CFR, 279.24(c)(3)] ☐ ☐

Used Oil Generator Requirements:	<input checked="" type="checkbox"/> Compliance	<input type="checkbox"/> Non-Compliance	<input type="checkbox"/> N/A
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On November 26, 2001, I conducted a routine hazardous waste compliance inspection of CMS Energy/Panhandle Eastern Pipe Line, a natural gas compressor station, located at 985 Road 90, Olpe, Kansas. The EPA identification number assigned to the site is KSD 984 972 737. Facility contacts for the inspection were Mr. Tom Jenkins - Area Supervisor and, via telephone, Ms. Victoria Wagner - Environmental Coordinator based in Houston, Texas.

The facility generates used motor, compressor, and coolant oil that is picked up periodically for reuse by Greensburg Oil Services out of Greensburg, Kansas. Used oil filters generated at the site are drained and then, depending on the type of filter, either landfilled or sent to NAPA, Emporia, Kansas, to be recycled.

No violations of the used oil regulations were cited as a result of my inspection.